| | Cost Reim | BURSABLE | VOUGHER FOR I | | | PA | ID BY | |
|------------------------------------|--------------------------------|---|---|----------------------|---------------------------------------|--|-----------------------|----------------|
| Varrahan muan | | | bureau, or establishment) | | | | | |
| | ared at | 1 SAPC 7629 | | | | | | |
| THE UNITED S | TATES, Dr., | Pay | Payee's Account No. 1169 | | | COPY | OF 3 | |
| To | | | | | | ــــــــــــــــــــــــــــــــــــــ | and the second second | |
| | | | (Payee) | | | | | |
| | (Add | ìress) | (City) | (State) | | | 1 | |
| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES (Enter description, item number of contract or Federal sealchedule, and other information deemed necessary) | | | QUANTITY - | UNIT PRICE | AMOUNT | |
| | | Discount Terms | | | _ | Cost Per | Dollars Cts | |
| | | Costs | | | | | 3,172 | 61 - |
| PAYMENT: Complete Partial Final | | Use | continuation sheet(s) if nece | 88ary | | | | |
| Shipped from | (| to | | Government B/L No. | , , , , , , , , , , , , , , , , , , , | Total use this space) | \$ 3,172 | 61 ~ |
| ST Date 6/2 8 Per | ATINTL | (Sign original only) edwhen al Title Date | STATINTL Reg. No. | Differe | ount verified; co | orrect forls) | 3174 | 2/ |
| Contract 110. | | | nt is correct and proper for | | | ~// | | - V |
| † Appro By - CONTR. Title | ACTING OFFI | COER | SIGN ORIGINAL ONLY STATINTL D WHEN PURCHASES ARE MADE O | †Title | HOUT WRITTEN AG | //12/56 Dertifying Officer) | STA | TINT |
| | ACCOU | NTING CLASSIFICAT | ION (Appropriation Symb | ol must be shown; ot | her classification | on optional) | | |
| APPROV | 'ingofficer | | STA ⁻ | ΓINTL | | | | |
| Paid by Check l | | | , 19, 1 | or \$ | | { on Treasurer of favor of payee | the United Sta | ates in |

standard Form No. 1035a—Revised
Form proceeded for Reliable Your bar for Caure programmer 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)

Services Other Than Personal

CONTINUATION SHEET

| J. S00 | | (Department, bureau, or establishment) | | UNIT | PRICE | AMOUN | T |
|--------------------------|-----------------------------------|---|---------------|------|-------|----------------|-----|
| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) | QUAN- TITY | Cost | Per | Dollars | Cts |
| | | Contract AlOl - System III | | | | | |
| | | Direct Costs Properly Chargeable to Contract AlOl for the period 2-9-56 thru 4-22-56 | | | | STATIN | JTL |
| | | Labor for the period 2-9-56 thru 4-22-56 | | | | | |
| TATINTL | | Overhead computed for the Electronic Instrumentation Division at interim rate of | | | | | |
| | | Total Labor & Gverhead | | | | | |
| ATINTL | | G & A expense computed at interim | | | | | |
| | | Total Costs | | | | \$ <u>3,17</u> | 2 6 |
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